



#11/c PB
10/16/03

**RESPONSE UNDER 37 C.F.R.
§ 1.116 EXPEDITED PROCEDURE
EXAMINING GROUP 2872**

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants:	Hiroshi Miyajima, et al.	Examiner:	Denise S. Allen
Serial No:	10/004,660	Art Unit:	2872
Filed:	December 3, 2001	Docket:	15126
For:	MIRROR ROCKING MEMBER FOR OPTICAL DEFLECTOR	Dated:	September 18, 2003

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE UNDER 37 C.F.R. § 1.116

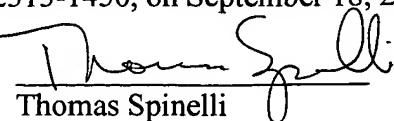
Sir:

In response to the Final Official Action dated July 15, 2003, Applicants respectfully request reconsideration of the above-identified application in light of the following amendments and remarks:

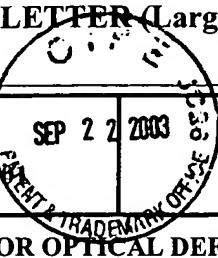
CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Mail Stop AF, P.O. Box 1450, Alexandria, VA 22313-1450, on September 18, 2003.

Dated: September 18, 2003


Thomas Spinelli

AF/2872

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 15126	
Applicant(s): Hiroshi Miyajima, et al.				Examiner Denise S. Allen	Group Art Unit 2872
Serial No. 10/004,660	Filing Date December 3, 2002				
Invention: MIRROR ROCKING MEMBER FOR OPTICAL DEFLECTOR					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
- CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	23 -	23 =	0	x \$18.00	\$0.00
INDEP. CLAIMS	4 -	4 =	0	x \$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____.</p> <p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-1013/SSMP</p> <p><input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p> <p><input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</p>					
 <u>Signature</u>					
Dated: September 18, 2003					
<p>Thomas Spinelli Registration No.: 39,533</p> <p>Customer Number: 23389</p> <p>I certify that this document and fee is being deposited on 9/18/2003 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p>  <p>Thomas Spinelli</p>					

**Thomas Spinelli
Registration No.: 39,533**

Customer Number: 23389

I certify that this document and fee is being deposited on 9/18/2003 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

cc: